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Supplemental Application Data Sheet

Application Information

Application number:: 09977052
 Filing Date:: 10/12/01
 Application Type:: Regular
 Subject Matter:: Utility
 Title:: PATIENT-SPECIFIC TEMPLATE
 DEVELOPMENT FOR
 NEUROLOGICAL EVENT
 DETECTION
 Attorney Docket Number:: N02-01
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 6
Total Drawing Sheets:: 10
Formal Drawings?:: No
Small Entity?:: Yes
Petition Included?:: No
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Benjamin D.
Family Name:: Pless
City of Residence:: Atherton
State or Province of Residence:: CA

09977052-031202

Street of mailing address:: 255 Santa Ana Court
City of mailing address:: Sunnyvale
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94085

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Thomas K.
Family Name:: Tcheng
City of Residence:: Pleasant Hill
State or Province of Residence:: CA
Street of mailing address:: 255 Santa Ana Court
City of mailing address:: Sunnyvale
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94085

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Eyad
Family Name:: Kishawi
City of Residence:: Daly City
State or Province of Residence:: CA
Street of mailing address:: 255 Santa Ana Court
City of mailing address:: Sunnyvale
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94085

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US

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Status:: Full Capacity
Given Name:: Barbara
Family Name:: Gibb
City of Residence:: Palo Alto
State or Province of Residence:: CA
Street of mailing address:: 255 Santa Ana Court
City of mailing address:: Sunnyvale
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94085

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Javier
Family Name:: Echauz
City of Residence:: Dunwoody
State or Province of Residence:: GA
Street of mailing address:: 10933 Crabapple Road #101
City of mailing address:: Roswell
State or Province of mailing address:: GA
Postal or Zip Code of mailing address:: 30075

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Rosana
Family Name:: Esteller
City of Residence:: Marietta
State or Province of Residence:: GA
Street of mailing address:: 10933 Crabapple Road #101
City of mailing address:: Roswell

State or Province of mailing address:: GA

Postal or Zip Code of mailing address:: 30075

Correspondence Information

Correspondence Customer Number:: 26876

Representative Information

<u>Representative Customer Number::</u>	<u>26876</u>	
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Assignee Information

Assignee Name:: NeuroPace, Inc.

City of mailing address:: Sunnyvale

State or Province of mailing address:: CA

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